



Crater Lake National Park Visitor Acknowledgment of Risk

I understand that participation in outdoor activities—including kayaking, hiking, snowshoeing, and related recreation—takes place in natural environments and involves inherent risks.

These may include, but are not limited to, slips and falls, exposure to icy water, changing weather conditions, wildlife encounters, water hazards, and remote locations where medical assistance may be delayed. These risks may result in injury, illness, property damage, or death.

***Voluntary Participation-** I voluntarily choose to participate in these activities with full knowledge of the risks involved and accept full responsibility for my participation.

***Participant Responsibility-I agree to follow all instructions provided by guides and staff, use all required safety equipment properly, and always act responsibly.** I understand that failure to do so may increase my risk of injury.

***Release of Liability To the fullest extent permitted by law,** I release and hold harmless Sky Lakes Wilderness Adventures (SLWA), its owners, employees, and affiliates from all claims, liabilities, or damages arising from my participation, including those caused by ordinary negligence.

***Medical Authorization-**In the event of an emergency, I authorize SLWA to secure medical treatment on my behalf. I understand that I am responsible for any associated costs.

 **I have carefully read and fully understood this agreement.** I acknowledge that I am signing it voluntarily and that it is legally binding upon my representatives and me.

Participant Information & Signature

Participant Name: _____

Signature: _____

Date: _____

Parent/Guardian (if under 18): _____

Signature: _____ Date: _____

Childs Name(s) _____

Childs Name(s) _____